



Maricopa County Assessor
Keith E. Russell, MAI

TAX EXEMPTION CLAIM FORM

NEW ☐
RENEWAL ☐

Organization Name: _____

Organization Mailing Address: _____

Property Address: _____

Book/Map/Parcel #: _____ - _____ - _____ Personal Property Acct #: _____
(Attach inventory list with property values)

Organization Rep & Title: _____

Telephone: _____ Date Filed: _____

Specify the Arizona Revised Statute, Title 42 Section for which this organization claims exemption: 42-111 _____

Exemption for: Land _____ Improvements _____ Personal Property _____ Auto _____ (attach VIN)

New applicants must submit copies of the following:

- Articles of Incorporation
- Current bylaws and any amendments
- State Income tax exemption letter (ARS 43-1201)
- Federal Income tax exemption letter from IRS (501-C-____)
- IRS 990 tax form, or previous year income and expense information
- Letter describing specific use(s) of property

Date property acquired by organization: _____ (Property must be in the name of the organization claiming exemption as of the lien date, January 1st. Failure to establish the fact of such recordation to the Assessor constitutes a waiver of exemption.)

Is any portion of the property rented, leased, used, or operated by another entity/person or organization since the January 1st lien date? Describe use: _____

Does organization receive income from property, or support/subsidies from another source? Describe: _____

The Assessor may require additional proof of the facts stated by the affiant, per ARS 42-11152. Please verify and correct any information pre-printed on this form for renewals. New applicants must complete form and attach copies of supporting documentation. Return entire form to Assessor for processing.

The Claimant as shown below, states the owner is not organized for profit and that no part of the net earnings of the owner inures to the benefit of any private shareholder or individual. For the Assessor to consider your claim, you must answer all questions and attach all supporting documents.

State of Arizona; County of Maricopa

I declare, under penalty of perjury, this claim for tax exemption including any supporting statements or documents is true and complete to the best of my knowledge and belief.

Date: _____

Claimant Signature

Subscribed and sworn to before me this: _____ day of _____ 20____

Signed: _____ (Deputy Assessor or Notary Public)